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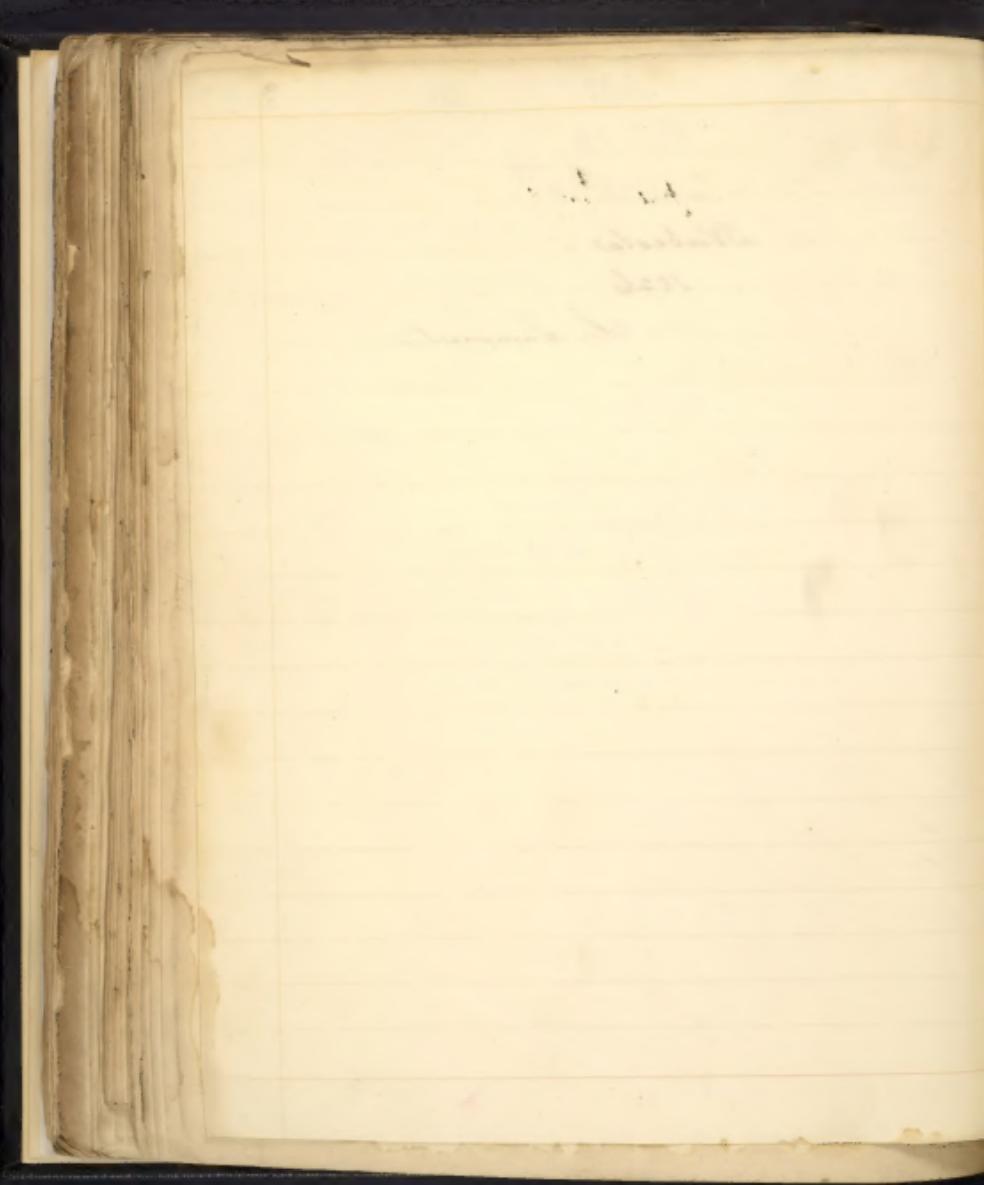
1825 Nth 9th

Rubeola

epidemic

1826

L. Samuel



Paper March 26th. 1827
W. J. M.

An Inaugural Dissertation
on
Puteola
by
Louis Lummel
of
Pennsylvania
1826

Non recite euquam, nisi amici, idque coactus" Hor.

20. 10. 182

Wetland in
the valley.

Wetland.

Wetland.

Wetland.

Wetland.

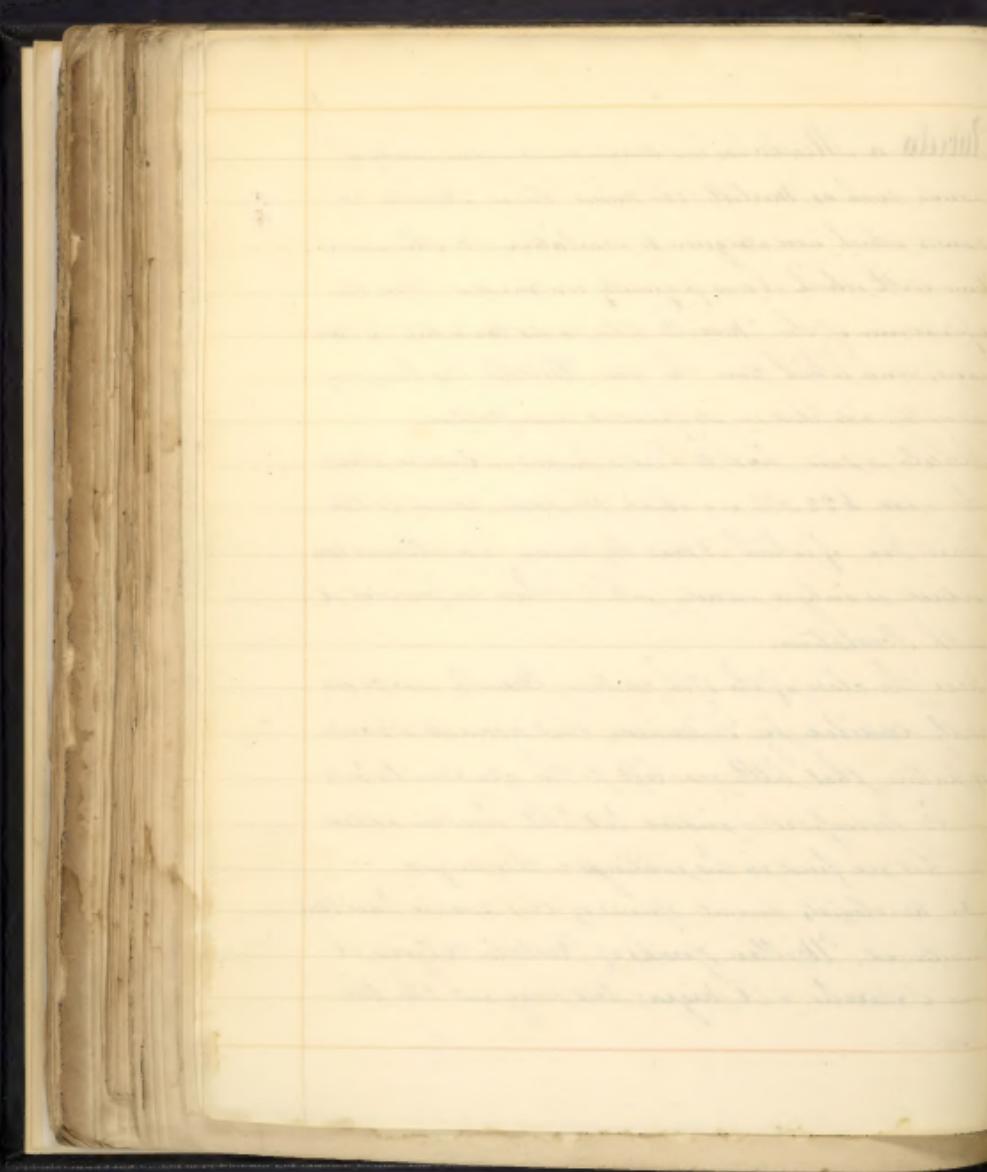
Wetland.

Rubella or Measles has been designated by a great variety of names, such as, Merlini, the minor plague, Roseola, &c.; names which were also given to Scarletina, & other eruptions with which it was frequently confounded, before the appearance of the "Nouvelles Clases des Maladies," by Sauvages; since which time the term Rubella has been very generally adopted in its present signification.

Rubella is said, first to have appeared in Europe about the year 622 A.D. i.e. about the same period as the small Pox, of which it was by many practitioners considered as only a variety, until others confounded it with Scarletina.

Near the close of the 17th century Measles was so correctly described by Sydenham, that accurate observer of nature, that little was left to the graphic talents of his successor; indeed but little has been added to what we find in his writings on this subject.

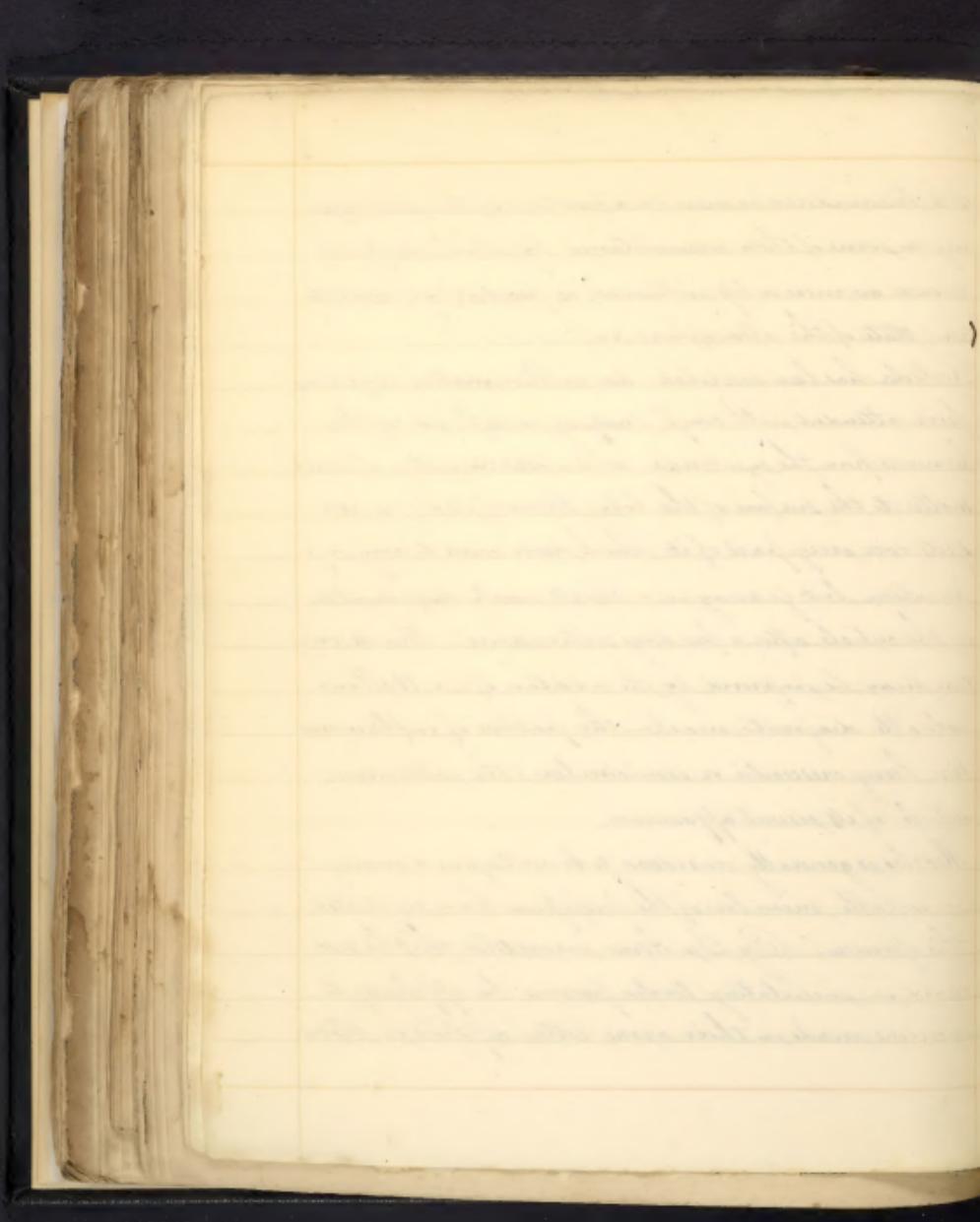
By nosologists several species of this disease have been mentioned. Willan speaks of Rubella Bulgaris, R. sive Catarrha, & R. nigra; but may not the two



last be considered as mere modifications of the first, depending on some of those circumstances by which nearly all diseases are more or less influenced, as peculiarity of constitution, state of the atmosphere, &c.

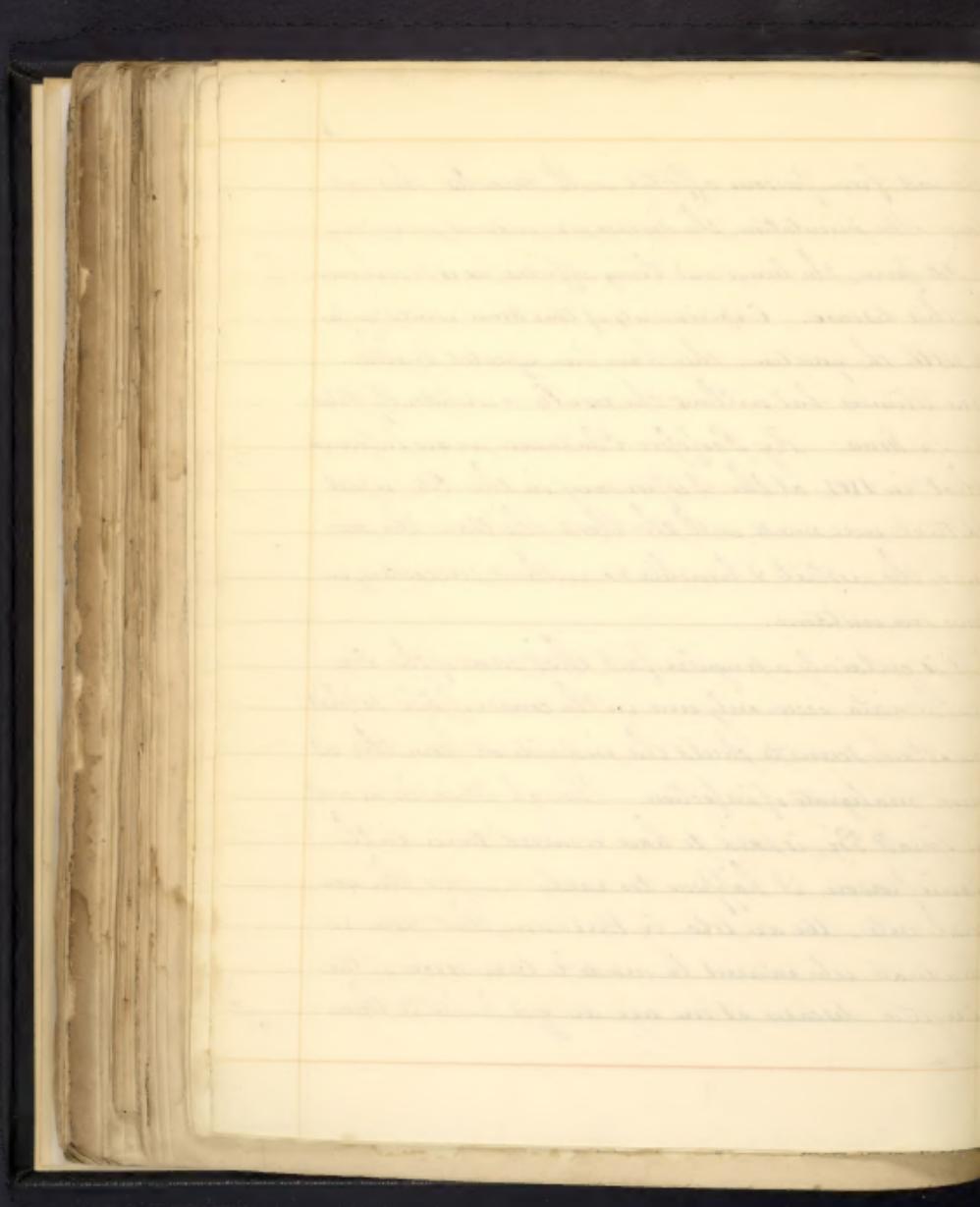
Puerula has been described, "an inflammatory infectious fever attended with cough, sneezing, a discharge of thin humours from the eyes & nose, and a determination of acrid matter to the surface of the body, showing itself in red spots over every part of it, which never come to any suppuration, but go away in a small mealy desquamation of the cuticle after a few days continuance". This description may be improved by the addition of Dr. Willan's valuable diagnostic mark—the patches of inflammation being crescentic or semicircular, & the intervening cuticle of its usual appearance.

Masles is generally considered to be contagious, & many respectable members of the profession have supported this opinion. By Dr. Horne was told, that he succeeded in inoculating twelve persons, by applying to incisions made in their arms cotton dipped in blood.



obtained from persons affected with Measles; that seven days after inoculation, the disease was induced in a young child form, the lungs not being affected, as is so common in this disease. Experiments of this kind would go far to settle the question: they have been repeated by other practitioners, but without the result so confidently stated by Dr Hume. By Professor Chapman we are informed that in 1801, at the Dispensary in this City, repeated trials were made with the blood, the tears, the mucus of the nostril & bronchia &c. without succeeding in any one instance.

It is certainly a singular fact, that some of the Exanthemata occur only once in the course of life, so that one attack seems to shield the individual from the most malignity of infection. Though Measles as well as Small Pox, is said to have occurred twice in the same person, it happens too rarely to affect the general rule. We are told by Hulham, that some individuals who cannot be made to take some of the eruptive diseases at one age, are yet liable to them



at another. The number of such individuals is probably small. Most persons having Measles in early life & thus obtaining the immunity, it is by no means surprising that this disease should be comparatively rare among adults. According to Dr Willan when no cataleptic symptoms occur, the susceptibility is not destroyed; in this case when the efflorescence diminishes, it is not uncommon for a second eruption to occur, accompanying with considerable constitutional disorder.

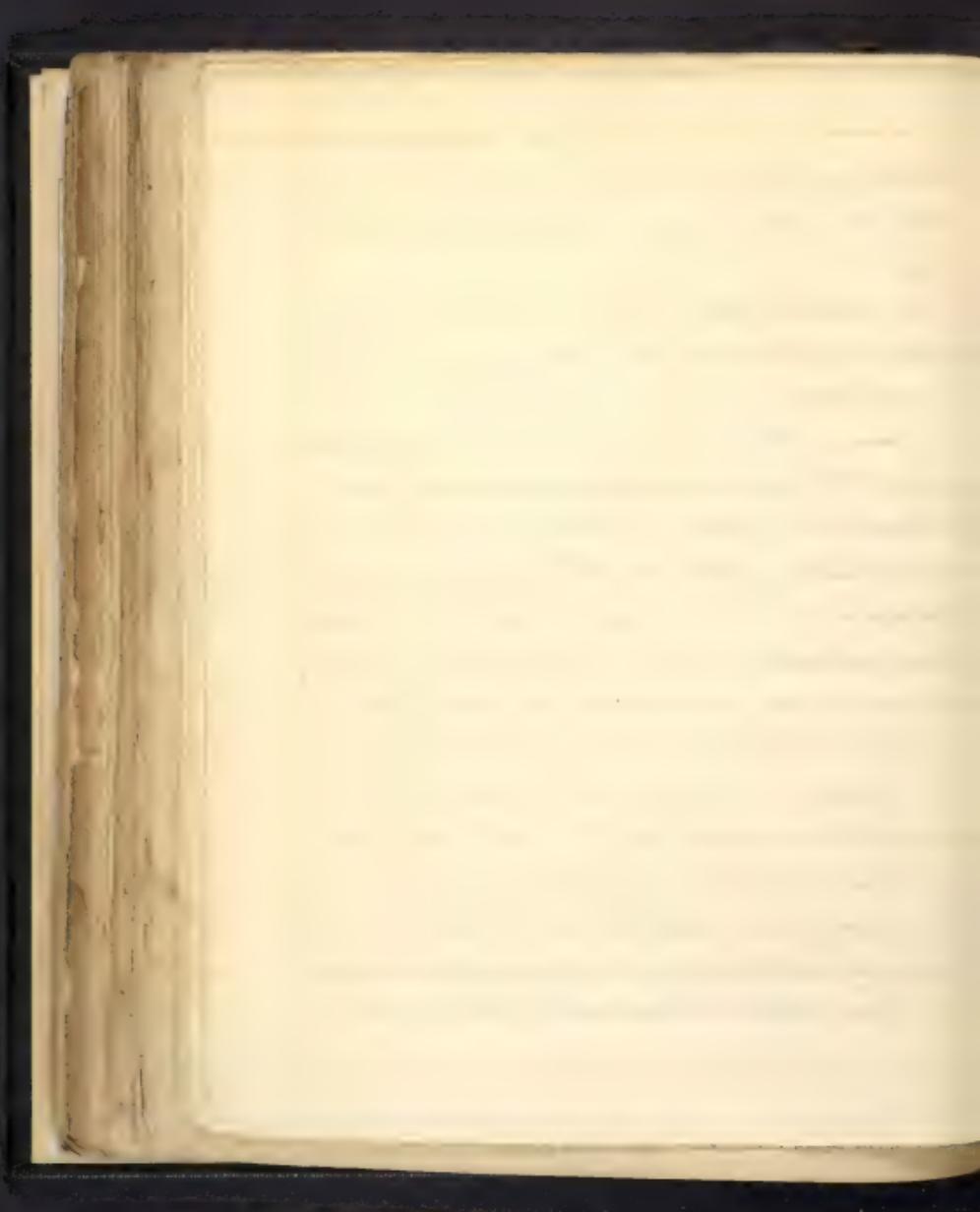
Measles is most common during the winter & young, but may be epidemic at any season. The general received opinion is, that it occurs as an epidemic every 7 years; in this City, as we are informed by Major Chapman, its returns since the year 1772 have been suspended & he is now restricted to the human race—the brute creation suffering at times greatly from it. It is much aggravated by intense heat & cold. We are told that Measles will not occurring together in the same place until the former has run its course. Dr Potts says, that



lebido will often cure. *Pectenpis*, *intermittens* & *remora* also, according to chronic *Thaumatisms* & *Cretus*.

like all other febrile diseases. Rubeta commences with violence, swelling & inflammation spreading & mounting in some instances almost to coma, heat, thirst, anxiety, pains in the head, back & limbs, sometimes prostration of the face & eyes, copious secretion of tears, swelling of the eyelids, sometimes nausea & even vomiting of bilious matter: to these symptoms may be added a dry cough, hoarseness, soreness of the throat, hurried respiration, hot dry skin, dyspnoea, pulse frequent & hard, a discharge of an acrid fluid from the nostrils accompanied with frequent sneezing.

The eruption usually appears about the 4th day, tho' occasionally not until the 7th & 8th & even later, first like flea bites on the forehead & then gradually progressing over the whole face & in a day or two covering the whole body. The spots are at first of a vivid red, which becomes darker as they increase.



in size, until they coalesce, into irregular vesicular patches, interspersed with single round dots. The efflorescence in the face is slightly elevated, as may be received by the finger. Mr Hazelline of Boronie Mairies observed an eruption on the gums & fauces three days before the efflorescence of Merulus.

The disease with which Hubola is apt to be confounded, is Scarlatina; & in some cases the diagnosis is by no means easy. We may be aided by attending to the following differences; the redness of scarlatina is more diffused, not in crescentic patches, not elevated; the eruption in scarlatina commonly appears on the 2nd day, & in Hubola not before the 3rd; the catarrhal symptoms are milder in scarlatina; we may also be assisted by the nature of the prevailing epidemic.

Our prognoses may be favourable, when the symptoms are mild, the expectoration loose & colourless, the eruption light & distinct, some degree of moisture on the surface, the breath sweet, & so; but



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when the cuttis is imperfectly thrown out, the head
much affected with sclerum when the breathing is
difficult & laborious, cough dry, skin parched, sudor
hard, or where the vomiting continues even after the
cystism has appeared, the consequence being that we
have great reason to dread the event.

Measles is apt to leave behind it some very distressing afflictions, as ophthalmia, inflammation of
the lungs, colic, an scorbutous constipation, frequent
urine in hectic fever or confirmed pleuritis, irri
tation of the intestines producing diarrhoea, or an
enlargement of the mesenteric veins occasioning
varicosis, &c &c &c.

The incipient cause of Measles seems to be a violent
action of the nervous membranes, either of the
premaxilla, or of the other parts of the sympha
laxis. That Measles degenerates in inflammation, is
seen by the symptoms & also by inspection; it
after the early irritates the lungs, heart &
liver, & so irrigates sometimes nearly filled



in violent cases.

Now the success of such a remedy is so great that the molasses & the syrup cannot take place. The danger is imminent: & hence the title of the disease, the terms Rubella Aigre, & Purid Measles have been used.

Hearts when occurring in a mild form requires but little medical treatment; the chief object of attention being to avoid exposure to cold by removing the patient to the house, & regulating the temperature of his chamber to the degree most comfortable to himself, which will generally be about 65°; no occasional administration of a gentle laxative, as senna & maseira or one of the neutral salts, to keep the bowels in a soluble state; avoiding every article of food or drink of a stimulating nature - living on mild tarinaceous articles, as barley sage, coffee-roots, & the like; & drinking cool water, lemonade, &c. But when the disease is more decided & inflammatory, the above



treatment will not be sufficient to carry the patient through the attack. This more aggravated state of the disease is known by the determination to the head inducing delirium & coma, by the difficulty of breathing, continual exertion to cough, full hard pulse, &c. In this case, the utility of phlebotomy is generally admitted; but the extent to which the lancet should be carried, is not agreed among practitioners, especially in children. By some it is said, that children do not bear it well & that it should be used with great caution; but we have the authority of some of our most valued physicians in support of as free use, in this affection as in any other, bleed-mania. Dr. Ellement Finsbury & the practice assures us, that children bear delirium of even, 'kins better than adults; that Measles is the worst inflammatory of the Exanthemata; they then should not hesitate to employ freely these means in the case of infants, which we know best about



ed to combat inflammations? If the head be
much affected, cups or leeches to the temples will
be useful; if much oppression of the chest or dif-
ficulty of breathing, to incise blistering from the
breast or back, after which a blister to the heart
should be used. The towels should not by any
means be neglected; by keeping them moderately
dry, we remove irritation; for this purpose the
neutral salt, as sulphate of magnesia, or partake
of potash & soda, may be selected. When the
thirst is great lemonade or the neutral mixture
(i.e. carb. potash confined with lemon juice &
water) will be found useful. The last
named remedy will also be serviceable, by pro-
ducing a acute diarrhoea. Should the eruption
be also inflammatory, or should it "strike in"; the
junctiois are much aggravated, & call for im-
mediate attention. The utility of the warm
bath & reiterations to the heart & extremities
is generally admitted; but we find some dis-



gence as to the nature of the internal means, in this case. Very many Practitioners recommend wine, & other warm liquors, & warm drincks: while some of our most intelligent physicians condemn the internal use of warm liquors, & advise cool drincks & demulcents. The use of Stimulants internally, in such cases, has certainly the sanction of ages; but when we remember the maxim of the Coan sage "ubiq' viridat
ibi al'bus," we are induced to believe, that irritation of the internal surfaces would rather con-
trach. than aid us in bringing the secretion
to the external surface. & it becomes not a
task to decide, between those who have given
way in the practice; yet the treatment of the
latter Physicians a' among the most b'cause
Mr. Sam' induced to give it the preference.
when the cough & expectorations are accom-
panied with suppuration, & membranes of inflamma-
tion continue, during which, most advantage-



well be derived from demulcent drinks, as Barley water, flaxseed tea, thin solution of gum Arabic, &c; but the inflammatory sun stains having subsided, the variousough infusions may be given that commonly called "green Mixture" is generally preferred. Slighted purples appearing, the treatment is the same as for the retrocession of the eruption; A.S. may be required, but should not be used with the same freedom as in the inflammation state; where Phlebotomy is indicated by the application of Cuts or Leeches to the Epigastric region succeeded by a blister, has been found sufficiently useful; mutual visits & cool airings are also necessary.

one of the most frequent & most disturbing symptoms I find is diarrhea for the relief of which, reated small bleedings are the best remedy. When however it continues after the febrile jumptions have abated a poultice or cut over the heart, then a blister to the same



part will generally afford relief. To guard against the consequent pneumonic affection, by no means unusual or unimportant, nothing is more likely to answer than the application of a blister over the chest, when the disease begins to decrease in violence; this plan is recommended with confidence, being advised by one of our most valued practitioners.

